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Bib Data Sheet

CONFIRMATION NO. 8636

<b>SERIAL NUMBER</b> 09/843,941	<b>FILING DATE</b> 04/30/2001	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 6530.0278
<b>APPLICANTS</b> James F. Hemerick, Champlin, MN; Eric Schneider, Albion, RI;				
<i>nt</i> <b>** CONTINUING DATA *****</b> <i>none</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>none</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/25/2001</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 46
			<b>INDEPENDENT CLAIMS</b> 4	
<b>ADDRESS</b> Finnegan, Henderson, Farabow, Garrett & Dunner, L.L.P. 1300 I Street, N.W. Washington, DC 20005-3315				
<b>TITLE</b> Endoscopic stent delivery system and method				
<b>FILING FEE RECEIVED</b> 1258	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	